



ADMINISTRATIVE CERTIFICATE  
OF COMPLIANCE (CO)

What is it ?

An **Administrative Certificate of Compliance** is a means by which a property owner can determine if property will be accepted by the City as a legal parcel. In general, an illegal parcel is one which was divided by some formal act without having been processed and approved by the appropriate agency. Most often, illegal parcels are created when someone wants to sell part of their property, or perhaps give it to another member of the family, and simply has a deed executed and recorded. When a building permit is requested for a new structure the legality of the lot’s subdivision may arise and result in the need to request a Certificate of Compliance from the City. To initiate this review, you must have a written statement called a Notice of Determination from the City Surveyor indicating that a Certificate of Compliance is necessary.

Documents must be provided as explained below. Planning staff will prepare a report analyzing the existing property configuration. As part of that review any existing sub-standard setbacks or property dimensions will be researched. If variances to the zoning code standards are needed they will have to be justified by the applicant. The case will be reviewed by the Zoning Administrator and the process takes 30 days from submittal of a complete application to a final approval.

What do I submit?

A. ITEMS REQUIRED FOR FILING: CHECK REQUIRED ITEM BEING SUBMITTED. YOU MUST SUBMIT EACH REQUIRED ITEM OR YOUR APPLICATION WILL NOT BE ACCEPTED NOR PROCESSED.

1. **General Application Form and Written Description of the Proposal:** 1 copy of the completed General Application form and 1 copy of a complete written description of your proposal.

2. **Fees:**

<b>Administrative Certificate of Compliance</b>	
<i>For first lot</i>	\$ 484.00
Each additional lot including streets and easements	\$ 165.00
Appeal	\$ 220.00
<i>Previously authorized by the Planning Commission or City Council (Usually in conjunction with a previously approved zoning case)</i>	
<i>For first lot</i>	\$ 253.00
Each additional lot	\$ 165.00

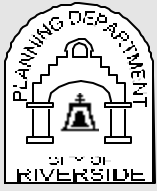
**FILING FEES ARE GENERALLY NOT REFUNDABLE.**

3. **A written statement from the City Surveyor or a Determination of Compliance indicating that a Certificate of Compliance is applicable to your situation.**

4. **Plat or Map:** 15 copies including the following:
- a. Delineation of all existing improvements including buildings, accessory structures, swimming pools and easements and public streets and north arrow.
  - b. Contour lines with intervals adequate to determine the average natural slope on any undeveloped parcels.
  - c. Vicinity map.
5. The **Hazardous Site Review** and the **Hazardous Materials Questionnaire** handouts are required with your submittal packet.

B. NOTICE TO APPLICANTS:

1. Certificate of Compliance applications will be conditionally accepted on the presumption that the application is ~~totally~~ valid. However, should the Planning Department at any time prior to hearing, determine that the submittals are incomplete or inaccurate, said submittals may be rejected for processing or delayed until necessary amendments or additions to the applications are made.
2. Applicant, representative, or legal owner should be present at all hearings, if a hearing is required.
3. The official staff reports will be mailed. Applicants may receive an extra copy of the report concerning their application at the Planning Department office prior to the hearing. Call (909) 826-5371.
4. Appeal procedures may be obtained at the Planning Department Office and can be found on the final report received from the Planning Department.
5. Processing takes approximately one month from the filing deadline. Refer to the “Non-CEQA” columns on the Zoning Administrator’s tentative agenda.



# GENERAL APPLICATION FORM



**Request:** \_\_\_\_\_

(State in detail what you want to do, attach separate sheets as necessary.)

**Address of Subject Property:** \_\_\_\_\_

**Assessor's Parcel Number(s):** \_\_\_\_\_

**Size of Subject Property:** \_\_\_\_\_

- ☐ **Attach a copy of the most recent Grant Deed.**
- ☐ **If your request is not for the entire property described on the deed, also attach a metes and bounds description.**
- ☐ **Attach a copy of the Assessor's Plat Map showing the subject site.**

**Legal Owner Information:**

*I hereby certify that I am (we are) the record owner(s) (for property tax assessment purposes) of the property encompassed by this application. I further waive the right of a decision of the project by the City within the prescribed time limits as set forth in the Municipal Code in the event an Environmental Impact Report is required to be prepared for the project. I also understand and agree that the submittal date of my application will be the filing deadline following receipt of my request.*

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_ Facsimile: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Applicant Information:**

(If other than legal owner)

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_

Facsimile: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**Representative Information:**

(If other than applicant)

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: (\_\_\_\_) \_\_\_\_\_

Facsimile: (\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**If any other person should be notified regarding the processing of this request, attach the name, address, and telephone number on an additional sheet and check this box ' ' .**

**Notice:** Failure to fully complete this application or provide attachments will cause a processing delay or its rejection.

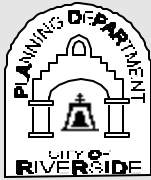
**THIS SECTION TO BE COMPLETED BY STAFF**

Type of Case: \_\_\_\_\_ Received By: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ CEQA' NONCEQA'

Filing Fee: \_\_\_\_\_ Date: \_\_\_\_\_ Filing Deadline: \_\_\_\_\_ TEAM: N ' S ' C '

Memo: \_\_\_\_\_ Entered in Caselogs '

**For Questions Contact the Planner on Duty  
3900 Main Street, Riverside, CA 92522  
Telephone (909) 826-5371, Facsimile (909) 826-5622**



Hazardous Materials Questionnaire

Dear Business Person:

The following questionnaire is required to be completed and submitted with your building plans. Building plans shall not be accepted by the City of Riverside Fire Department unless all information on this form has been completed. Based on response provided, additional information may be required. If you have any questions, call the City of Riverside Fire Department's Hazardous Materials Officer or the Fire Protection Analyst at (909) 826-5321.

HAZARDOUS MATERIAL means any material that because of its quantity, concentration, or physical or chemical characteristics poses a significant present or potential hazard to human health and safety or to the environment if released into the work place or the environment. "Hazardous Materials" include, but are not limited to, hazardous substances, hazardous waste, and any material that the Administering Agency has a reasonable basis for believing would be injurious to the health and safety of persons or harmful to the environment if released into the work place or the environment.

ACUTELY HAZARDOUS MATERIAL (AHM) is identified for federal regulation requirements in the April 22, 1987, Federal Register and amended in the February 25, 1988, Federal Register.

Each question below must be answered by checking the appropriate box as it applies to your facility.

YES NO

- ☐ ☐
1. Do you intend to manufacture, store, or use hazardous materials at this facility?
- ☐ ☐
2. Is there a school, hospital, or long-term care facility located within 1000 feet of your proposed place of business?
- ☐ ☐
3. Is any Acutely Hazardous Material (AHM) manufactured or used in a chemical reaction?
- ☐ ☐
4. Is any flammable gas, flammable liquid, or potentially explosive material manufactured or used in a chemical reaction?
- ☐ ☐
5. Can any unplanned release of an AHM to the atmosphere result from the malfunction of any scrubbing, treatment, or neutralization system or from a pressure relief device discharge directly into the atmosphere?
- ☐ ☐
6. Does any physical or chemical process involve the production or use of more than the Threshold Planning Quantity (TPQ) of any AHM at any one time?
- ☐ ☐
7. Is there an ignition source such as a fired heater or other open flame within 100 feet of any process, storage, or transfer area where a flammable or explosive AHM is present in excess of its TPQ; or is any other AHM present in excess of its TPQ at the same time as any other flammable material in excess of 10,000 lbs. except where there is a firewall providing separation?
8. Is any equipment or piping handling any AHM:
- ☐ ☐
- a. More than 10 years old?
- ☐ ☐
- b. More than 25 years old?

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

I certify under the penalty of perjury the foregoing information is true and correct to the best of my knowledge.

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*\*\*\*\*

FOR PLANNING OFFICE USE ONLY

Type of Case \_\_\_\_\_ Date RCVD \_\_\_\_\_ Hearing Date \_\_\_\_\_

Case # \_\_\_\_\_ Please respond to Planning by \_\_\_\_\_

Name of Planner \_\_\_\_\_ Date Sent to Fire Dept. \_\_\_\_\_

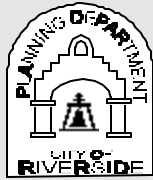
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FOR FIRE DEPARTMENT OFFICE USE ONLY

Date received (PC) \_\_\_\_\_ Received by (PC) \_\_\_\_\_

Date received (HM) \_\_\_\_\_ Received by (HM) \_\_\_\_\_

RMPP: (Y) \_\_\_\_\_ (N) \_\_\_\_\_ BEP: (Y) \_\_\_\_ (N) \_\_\_\_ Req. By: \_\_\_\_ Date \_\_\_\_\_ (89)



TO THE APPLICANT:

Subsection 65962.5(e) of the California Government Code requires that no application for a development project be accepted as complete unless accompanied by a signed statement by the applicant that the Hazardous Waste and Substances Sites List has been consulted to determine whether or not the proposed development site is included on the list. The sites list is prepared and annually updated by the Governor's Office of Planning and Research. A copy of the current list for the City of Riverside may be viewed or obtained at the Riverside City Planning Department, 3900 Main Street, Riverside, California, 92522.

You are required to fully complete the following information and submit it with your development project application. Please type or print all answers except for the signature block.

PROJECT ADDRESS (if known): \_\_\_\_\_

\_\_\_\_\_

ASSESSOR'S PARCEL NUMBER(S): \_\_\_\_\_

GENERAL LOCATION OF PROJECT SITE: \_\_\_\_\_

\_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

APPLICANT'S TELEPHONE NUMBER:(\_\_\_\_)\_\_\_\_\_

CERTIFICATION

The Hazardous Waste and Substances Sites List on file with the City of Riverside Planning Department has been consulted and the above identified development project site has been found (check appropriate box below)

\_\_\_\_\_ to fall within an identified hazardous site.

\_\_\_\_\_ not to fall within an identified hazardous site.

_____	_____
Applicant's Signature	Date

FOR OFFICE USE ONLY

Type of Case \_\_\_\_\_ Date RCVD \_\_\_\_\_ Hearing Date \_\_\_\_\_

Case # \_\_\_\_\_ Please respond to Planning by \_\_\_\_\_

Name of Planner \_\_\_\_\_ Date Sent to Fire Dept. \_\_\_\_\_